

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HIL		4-27-01
O.I.P.E. CLASSIFIER		2	2/16/01
FORMALITY REVIEW	A.S	943	5-18-1
RESPONSE FORMALITY REVIEW	h	25	7/18/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	4/5
2	2/14
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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